

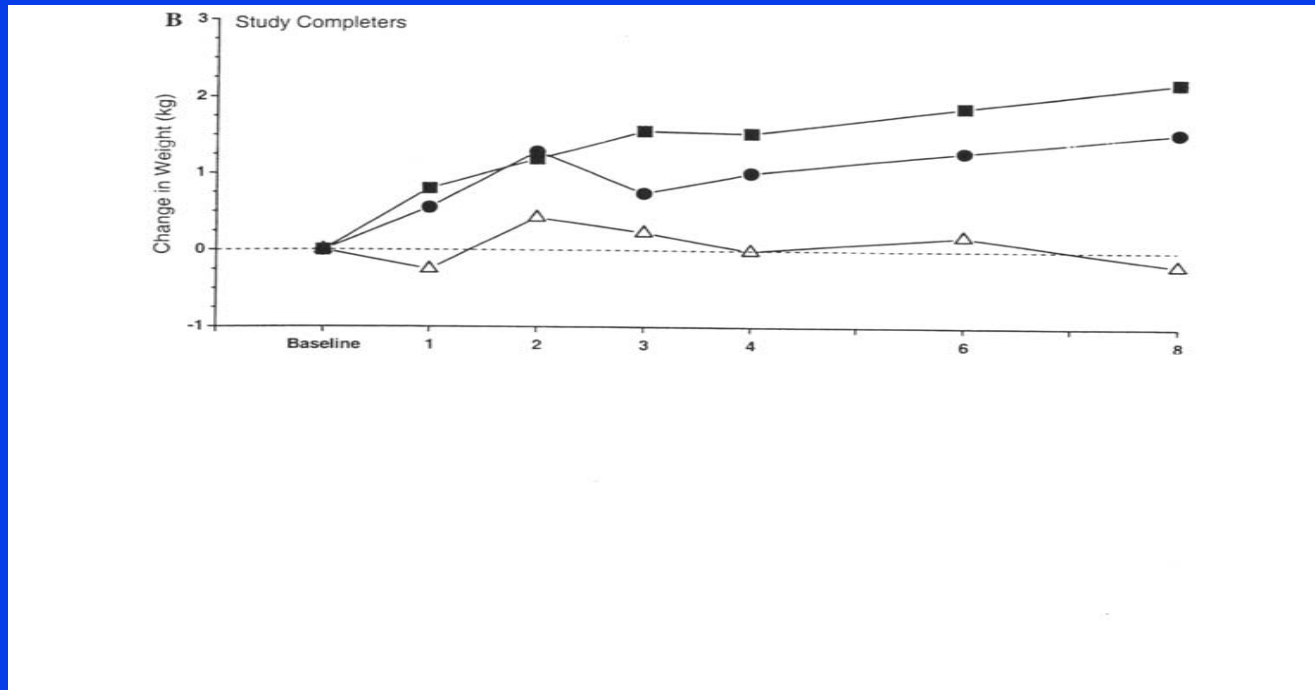
M_ss_ng D_t_a

Janet Wittes
Statistics Collaborative

The Caterpillar

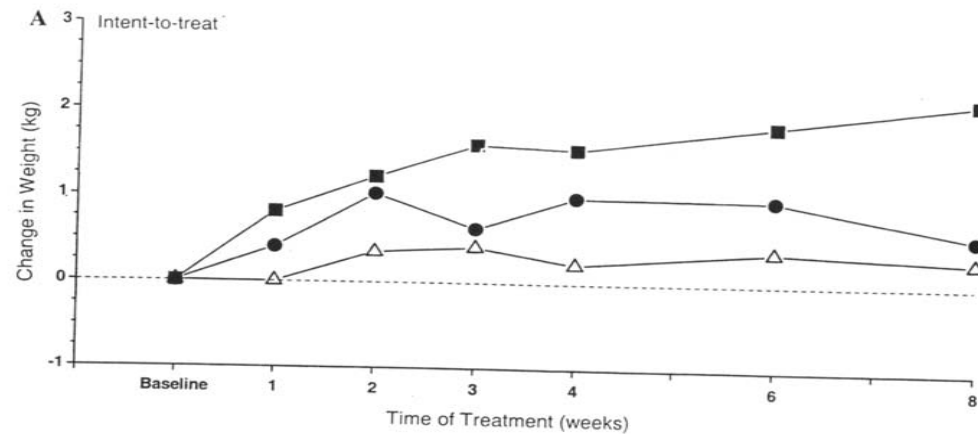
- Calling something the “intent-to-treat” population doesn’t mean the analysis is “intent-to-treat”

Study Completers



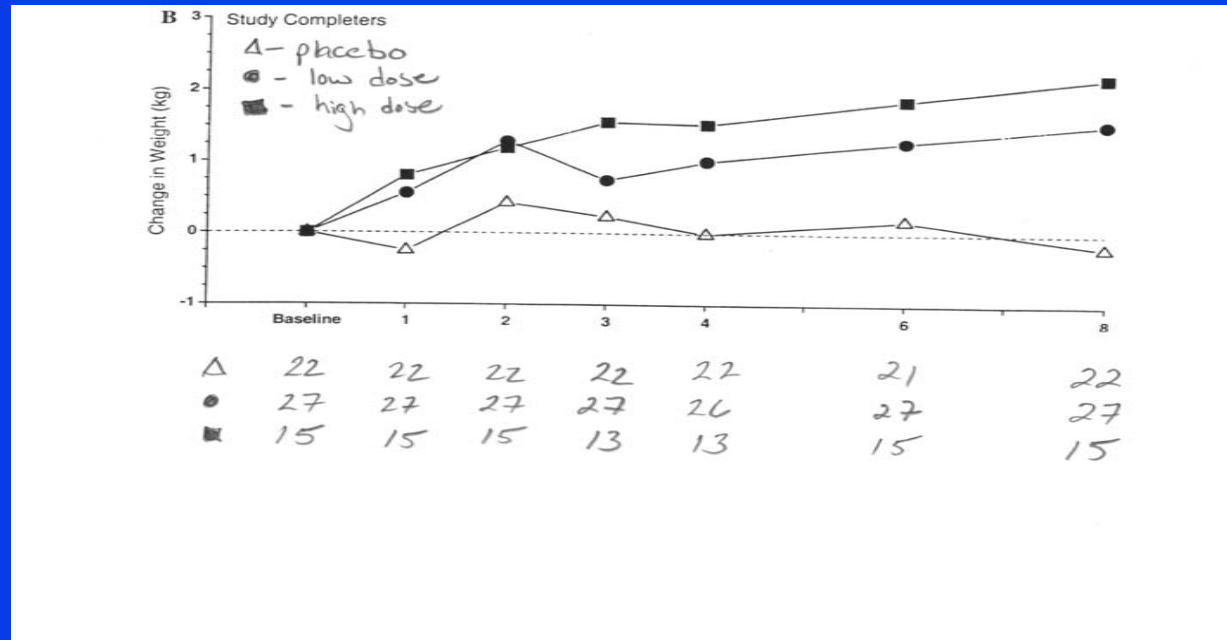
▲=placebo ■=low ●=high

“Intent-to-treat”



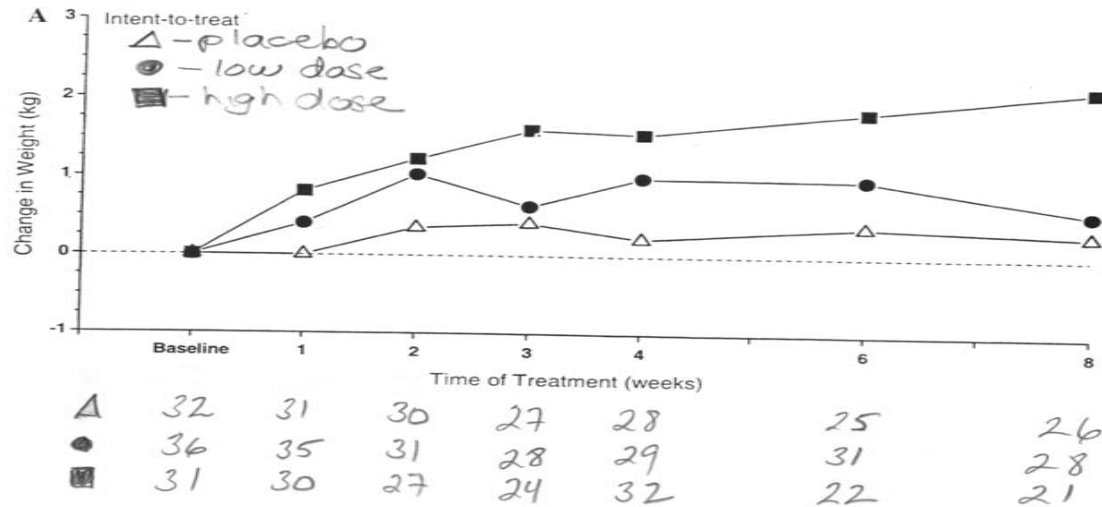
▲=placebo ■=low ●=high

Completers



▲ = placebo ■ = low ● = high

“Intent-to-treat”



▲=placebo

■=low

●=high

Daily Mean Number of Urinary Incontinence Episodes

	Placebo	Behavior	Drug
Baseline	5.0 ± 3.2	4.8 ± 2.9	4.7 ± 2.9
Proportion missing final value			
	10%	12%	18%
Change to end of study			
LOCF	-2.1	-2.9	-3.2
Observed	-2.6	-2.8	-3.0

(n=100/group; all baseline medians=4)

Completion of study/Withdrawal from study	
<p>Is the subject being withdrawn before the planned end of study? N <input type="checkbox"/> No y <input type="checkbox"/> Yes</p> <p><i>If NO, please sign and date below and fill out only section "Completion of study".</i></p> <p><i>If YES, please fill out the whole page.</i></p>	
<h3>Withdrawal from study</h3>	
<p>Date of withdrawal: / / 200</p> <p style="text-align: center; font-size: small;">(day) (month) (year)</p>	
<p>Reason for premature withdrawal from study <i>(check only one)</i></p> <p>A <input type="checkbox"/> the subject no longer meets the criteria to remain in the study</p> <p>B <input type="checkbox"/> new adverse event or worsening of an existing adverse event</p> <p style="padding-left: 20px;"><i>Please supply an "Adverse event report" form as appropriate.</i></p> <p>C <input type="checkbox"/> lack of efficacy</p> <p>D <input type="checkbox"/> poor compliance with treatment</p> <p>E <input type="checkbox"/> the subject did not wish to continue in the study</p> <p>F <input type="checkbox"/> the subject is lost to follow-up</p> <p>G <input type="checkbox"/> administrative reasons</p> <p>H <input type="checkbox"/> protocol violation</p> <p>I <input type="checkbox"/> the subject died</p> <p style="padding-left: 20px;"><i>Please fax a "Serious adverse event report" and complete "In case of death" form.</i></p> <p>J <input type="checkbox"/> at the discretion of the investigator</p> <p>K <input type="checkbox"/> other reason <i>(please specify)</i> _____</p>	

Choices

- Don't have any missing values
- Use what you have
- Redefine your endpoint
- Use slope
- Impute
 - If so, how?

Avoid missing values

- Important to get follow-up measures
 - Cessation of program not excuse for failing to measure last observation

Use what you have

Does not respect the randomization

Redefine your endpoint

- Ventilator failure in acute lung injury
 - Number of days ALIVE and not on ventilator
- Alcoholism
 - Number of days of **known** abstinence
 - Missing data = heavy drinking

Redefine...

- AIDS
 - Success=**Known** increase in weight of at least 1 kg
- Incontinence
 - Success= **Known** number of episodes less than 3 times per week

Slope

- Assume that slope extends beyond last measure
 - Even after death?

Impute

- Idea: assign number to the last value
- Choices
 - LOCF
 - Windows
 - Worst case
 - Worst reasonable case
 - Multiple imputation

What does it mean to impute?

- Reason for missing
 - Moved
 - Died
 - Adverse event
 - Quit

Classify your missing

- Completely at random
- At random
- Related to treatment

“Sensitivity” Analysis

- Do the conclusions vary depending on the method of analysis you use?

AIDS p-values vs. placebo

	Low dose	High dose
Completers	0.006	0.04
Still on original	0.0007	0.10
LOCF	0.012	0.40
Dawson/Lagakos	0.012	0.53
WRC	0.12	0.78
Multiple impute	0.045	0.31

Incontinence example

- How sure are we that
 - The drug works?
 - The behavioral intervention works?

Conclusion

- Think of how much missing data you will have
- Design study to minimize missing data
- In analysis, check how robust your analyses are